8-10-05

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	his form, together wi	th applicable	fee(s), to:]	Commissione P.O. Box 145	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450		
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01 FC:2501 700.00 GP 02 FC:1504 300.00 GP					(Date)		
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO	. CONFIRMATION NO.	
09/970,356 10/03/2001 Michael A. Vaudre				. Vaudrey	ATI 12	1532	
TITLE OF INVENTION: NO	DISE CANCELING MICRO	OPHONE					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$300	\$1000	09/09/2005	
EXAMINER ART UN			IIT	CLASS-SUBCLASS			
FAULK, DEVONA E				381-094700			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				For printing on the patent front page, list) the names of up to 3 registered patent attorneys agents OR, alternatively,) the name of a single firm (having as a member a gistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is ted, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Adaptive Technologies, Inc. Blacksburg, Virginia							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are enclosed: 4b. Payment of Fec(s): A check in the amount of the fee(s) is enclosed.							
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Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-15/9 (enclose an extra copy of this form).							
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.							
The Director of the USPTO is NOTE: The Issue Fee and Pub interest as shown by the record	requested to apply the Issue olication Fee (if required) w ds of the United States Pate:	Fee and Publicat	ion Fee (if any from anyone Office.	y) or to re-apply any previo other than the applicant; a	usly paid issue fee to the applied egistered attorney or agent; or	cation identified above. the assignee or other party in	
Authorized Signature Clubb X-CT					Aug. 0.2005		
Typed or printed name Elliott D. Light			Registration No. 51,948				
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							